



Cancellation Request Form

Today's Date: _____

Guest Name: _____

Reservation Number _____

Property Name/# _____

Dates of Stay: _____

Reason for Cancellation:

As stated in your Vacation Rental Lease Agreement our Cancellation policy states:

All cancellations must be received in writing. Tenant is responsible for verifying that Seaside Vacations has received cancellation letter. No refund of payment on confirmed reservations until cancelled period is fully re-rented and confirmed for the same rental amount. Tenant will be responsible for any discounts (plus tax) extended to re-rent the property. Every effort is made to re-rent the home; however if the home does not re-rent, all monies received will be forfeited.

Once re-rented, all payments (excluding travel insurance premium and/or discounts) will be returned to the credit/debit card(s) used to secure your reservation. If your card is no longer active (canceled, expired, etc) please initial here _____ to receive your refund by mailed check instead. If you secured your reservation by cash, check, or money order you will receive your refund by mailed check.

Guest Signature: _____

Cancellation Request Form to be submitted to Finance upon completion.

Fax: 252.261.0165 Email: accounting@seasiderealty.com

Office Use Only:

Received By: _____

Date: _____

Cancelled By: _____

Date: _____